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**POWER OF ATTORNEY TO PROSECUTE APPLICATIONS BEFORE THE USPTO**

I hereby revoke all previous powers of attorney given in the application identified in the attached statement under 37 CFR 3.73(b).

I hereby appoint:

☒ Practitioners associated with the Customer Number: **41577**

**OR**

☐ Practitioner(s) named below (if more than ten patent practitioners are to be named, then a customer number must be used):

Name	Registration Number	Name	Registration Number

as attorney(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b).

Please change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(b) to:

☒ The address associated with Customer Number: **41577**

**OR**

<input type="checkbox"/> Firm or Individual Name			
Address			
City	State	Zip	
Country			
Telephone		Email	

Assignee Name and Address:

**Roche Diagnostics Operations, Inc.  
9115 Hague Road  
Indianapolis, IN 46250**

A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed.

## SIGNATURE of Assignee of Record

The individual whose signature and title is supplied below is authorized to act on behalf of the assignee

Signature	<i>D. Michael Young</i>	Date	1/30/06
Name	<b>D. Michael Young</b>	Telephone	<b>(317) 521-7340</b>
Title	<b>Assistant Secretary</b>		

**STATEMENT UNDER 37 CFR 3.73(b)**

Applicant/Patent Owner: Roche Diagnostics Operations, Inc.

Application No./Patent No./Control No.: 10/729,546 Filed/Issue Date: December 5, 2003

Entitled: SAMPLING DEVICES AND METHODS UTILIZING A HORIZONTAL CAPILLARY TEST STRIP

Roche Diagnostics Operations, Inc.

(Name of Assignee)

, a Corporation

(Type of Assignee: corporation, partnership, university, government agency, etc.)

states that it is:

1. ☒ the assignee of the entire right, title, and interest; or
2. ☐ an assignee of less than the entire right, title, and interest  
(The extent (by percentage) of its ownership interest is \_\_\_%)

in the patent application/patent identified above by virtue of either:

- A. ☐ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel \_\_, Frame \_\_, or a true copy of the original assignment is attached.

**OR**

- B. ☒ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as follows:

1. From: Raney, J. Roe, Jung, Wiegel, S. Roe, Perez To: Amira Medical  
The document was recorded in the United States Patent and Trademark Office at Reel 015768, Frame 0866, or for which a copy thereof is attached.
2. From: Rafael C. Donnay To: Amira Medical  
The document was recorded in the United States Patent and Trademark Office at Reel 015768, Frame 0466, or for which a copy thereof is attached.
3. From: David S. Fisher To: Amira Medical  
The document was recorded in the United States Patent and Trademark Office at Reel 015768, Frame 0453, or for which a copy thereof is attached.

- ☒ Additional documents in the chain of title are listed on a supplemental sheet.

**As required by 37 CFR 3.73(b)(1)(i), the documentary evidence of the chain of title from the original owner to the assignee was, or currently is being, submitted for recordation pursuant to 37 CFR 3.11.**

[NOTE: A separate copy (i.e., a true copy of the original assignment document(s)) must be submitted to Assignment Division in accordance with 37 CFR Part 3, to record the assignment in the records of the USPTO. See MPEP 302.08]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

/Charles P. Schmal #45.082/

Signature

October 16, 2006

Date

Charles P. Schmal, Reg. No. 45082

Typed or printed name

(317) 634-3456

Telephone Number

Appointed Practitioner to Act on Behalf of Assignee

Customer Number 41577

Title

**STATEMENT UNDER 37 CFR 3.73(b) – SUPPLEMENTAL SHEET**

Applicant/Patent Owner: Roche Diagnostics Operations, Inc.

Application No./Patent No./Control No.: 10/729,546 Filed/Issue Date: December 5, 2003

Entitled: **SAMPLING DEVICES AND METHODS UTILIZING A HORIZONTAL CAPILLARY TEST STRIP**

Roche Diagnostics Operations, Inc., a Corporation

(Name of Assignee)

(Type of Assignee: corporation, partnership, university, government agency, etc.)

**B. Additional documents in the chain of title – Continued**

4. From: Ian M. Munson To: Amira Medical

The document was recorded in the United States Patent and Trademark Office at  
Reel 015768, Frame 0921, or for which a copy thereof is attached.

5. From: Amira Medical To: Roche Diagnostics Operations, Inc.

The document was recorded in the United States Patent and Trademark Office at  
Reel 015769, Frame 0369, or for which a copy thereof is attached.